

**Town, City, Village, State or Federal
Permits May Also Be Required**

LAND USE - X
SANITARY -
SIGN -
SPECIAL - NA
CONDITIONAL -
BOA -

**BAYFIELD COUNTY
PERMIT**

**WEATHERIZE AND POST THIS PERMIT
ON THE PREMISES DURING CONSTRUCTION**

No: 09152202-2022

Tax ID: 30553

**Issued To: EDMUNDS TRUST DTD JANUARY
13 2021**

**Location: NW NW IN DOC 2021R-586508 Section 01
7**

Township 48 N.

Range 05 W.

WASHBURN

Govt Lot 1

Lot

Block

Subdivision:

CSM#

For: Residential / Detached Garage / 40L x 80W x 16H

Condition(s): To meet all setbacks, including eaves and overhangs. For personal storage only. No plumbing permitted. No sleeping quarters/bedrooms permitted. Town/State/DNR permits may be required.

NOTE: This permit expires one year from date of issuance if the authorized construction work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.

This permit may be void or revoked if any performance conditions are not completed or if any conditions are violated.

Erica Meulemans

Authorized Issuing Official

Tue Nov 01 2022

Date

SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:
Bayfield County
Planning and Zoning Depart.
PO Box 58
Washburn, WI 54891
(715) 373-6138

APPLICATION FOR PERMIT
BAYFIELD COUNTY, WISCONSIN



Permit #:	22-0307
Date:	11-4-2022
Amount Paid:	267. - 11-4-2022
Other:	duk
Refund:	

INSTRUCTIONS: No permits will be issued until all fees are paid.
Checks are made payable to: Bayfield County Zoning Department.

DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT.

Original Application MUST be submitted

FILL OUT IN INK (NO PENCIL)

TYPE OF PERMIT REQUESTED <input checked="" type="checkbox"/> LAND USE <input type="checkbox"/> SANITARY <input type="checkbox"/> PRIVY <input type="checkbox"/> CONDITIONAL USE <input type="checkbox"/> SPECIAL USE <input type="checkbox"/> B.O.A. <input type="checkbox"/> OTHER			
Owner's Name: RANDY J. SNIPPEN	Mailing Address: 7106 MEAD DR.	City/State/Zip: SCHOFIELD, WI 54476	Telephone:
Address of Property: 28490 S. MAPLE HILL RD.	City/State/Zip: WASHBURN, WI 54891	Cell Phone: 715-297-1468	
Email: (print clearly) rsnippen22@gmail.com			
Contractor: SELF	Contractor Phone: 715-297-1468	Plumber: DENNIS BACHAND	Plumber Phone: 715-209-2036
Authorized Agent: (Person Signing Application on behalf of Owner(s))	Agent Phone:	Agent Mailing Address (include City/State/Zip):	Written Authorization Required (for Agent)
PROJECT LOCATION	Legal Description: (Use Tax Statement)	Tax ID# 31039	Recorded Document: (Showing Ownership) 2021R - 591246
1/4, 1/4	Gov't Lot	Lot(s)	CSM
Vol & Page	CSM Doc #	Lot(s) #	Block #
Subdivision:			
Section 27, Township 49N, Range 05W, W	Town of: WASHBURN	Lot Size	Acreage 40

<input type="checkbox"/> Shoreland	<input type="checkbox"/> Is Property/Land within 300 feet of River, Stream (incl. Intermittent) Creek or Landward side of Floodplain? If yes---continue →	Distance Structure is from Shoreline : _____ feet	Is your Property in Floodplain Zone? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Are Wetlands Present? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	<input type="checkbox"/> Is Property/Land within 1000 feet of Lake, Pond or Flowage If yes---continue →	Distance Structure is from Shoreline : _____ feet		
<input checked="" type="checkbox"/> Non-Shoreland				

Value at Time of Completion * include donated time & material	Project	Project # of Stories	Project Foundation	Total # of bedrooms on property	What Type of Sewer/Sanitary System(s) Is on the property or Will be on the property?	Type of Water on property
\$89,000	<input checked="" type="checkbox"/> New Construction	<input checked="" type="checkbox"/> 1-Story	<input type="checkbox"/> Basement	<input checked="" type="checkbox"/> 1	<input type="checkbox"/> Municipal/City	<input type="checkbox"/> City
	<input type="checkbox"/> Addition/Alteration	<input type="checkbox"/> 1-Story + Loft	<input type="checkbox"/> Foundation	<input type="checkbox"/> 2	<input checked="" type="checkbox"/> (New) Sanitary Specify Type: CONVENTIONAL	<input checked="" type="checkbox"/> Well
	<input type="checkbox"/> Conversion	<input type="checkbox"/> 2-Story	<input checked="" type="checkbox"/> Slab	<input type="checkbox"/> 3	<input type="checkbox"/> Sanitary (Exists) Specify Type:	<input type="checkbox"/>
	<input type="checkbox"/> Relocate (existing bldg)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Privy (Pit) or <input type="checkbox"/> Vaulted (min 200 gallon)	<input type="checkbox"/>
	<input type="checkbox"/> Run a Business on Property	<input type="checkbox"/>	<input checked="" type="checkbox"/> Use	<input type="checkbox"/> None	<input type="checkbox"/> Portable (w/service contract)	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/> Year Round	<input type="checkbox"/>	<input type="checkbox"/> Compost Toilet	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> None	<input type="checkbox"/>	<input type="checkbox"/>

Existing Structure: (if addition, alteration or business is being applied for)	Length:	Width:	Height:
Proposed Construction: (overall dimensions)	Length: 70 feet	Width: 40 FEET	Height: 26 feet + (TO ROOF PEAK)

Proposed Use	✓	Proposed Structure	Dimensions	Square Footage
<input checked="" type="checkbox"/> Residential Use	<input type="checkbox"/>	Principal Structure (first structure on property)	(X)	
	<input type="checkbox"/>	Residence (i.e. cabin, hunting shack, etc.)	(X)	
		with Loft	(X)	
		with a Porch	(X)	
		with (2nd) Porch	(X)	
<input type="checkbox"/> Commercial Use		with a Deck	(X)	
		with (2nd) Deck	(X)	
		with Attached Garage	(X)	
<input type="checkbox"/> Municipal Use	<input type="checkbox"/>	Bunkhouse w/ (<input type="checkbox"/> sanitary, or <input type="checkbox"/> sleeping quarters, or <input type="checkbox"/> cooking & food prep facilities)	(X)	
	<input type="checkbox"/>	Mobile Home (manufactured date) _____	(X)	
	<input type="checkbox"/>	Addition/Alteration (explain) _____	(X)	
	<input checked="" type="checkbox"/>	Accessory Building (explain) garage/shed	(70 X 40)	2800
	<input checked="" type="checkbox"/>	Accessory Building Addition/Alteration (explain) POSSIBLE LEAN-TO x 2	(70 X 10x2)	= 1400
	<input type="checkbox"/>	Special Use: (explain) _____	(X)	
	<input type="checkbox"/>	Conditional Use: (explain) _____	(X)	
	<input type="checkbox"/>	Other: (explain) _____	(X)	

FAILURE TO OBTAIN A PERMIT or STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES

I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the above described property at any reasonable time for the purpose of inspection.

Owner(s): Randy J. Snippen
(If there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)

Date 10/13/2022

Authorized Agent: _____ (See Note below)
(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

Date _____

Address to send permit 7106 MEAD DR. SCHOFIELD, WI 54476

Attach
Copy of Tax Statement

If you recently purchased the property send your Recorded Deed

Turn Over

APPLICANT - PLEASE COMPLETE PLOT PLAN

In the box below: **Draw or Sketch your Property** (regardless of what you are applying for)

- (1) Show Location of:

(2) Show / Indicate:

(3) Show Location of (*):

(4) Show:

(5) Show:

(6) Show any (*):

(7) Show any (*):

Proposed Construction

North (N) on Plot Plan

(*) Driveway and (*) Frontage Road (Name Frontage Road)

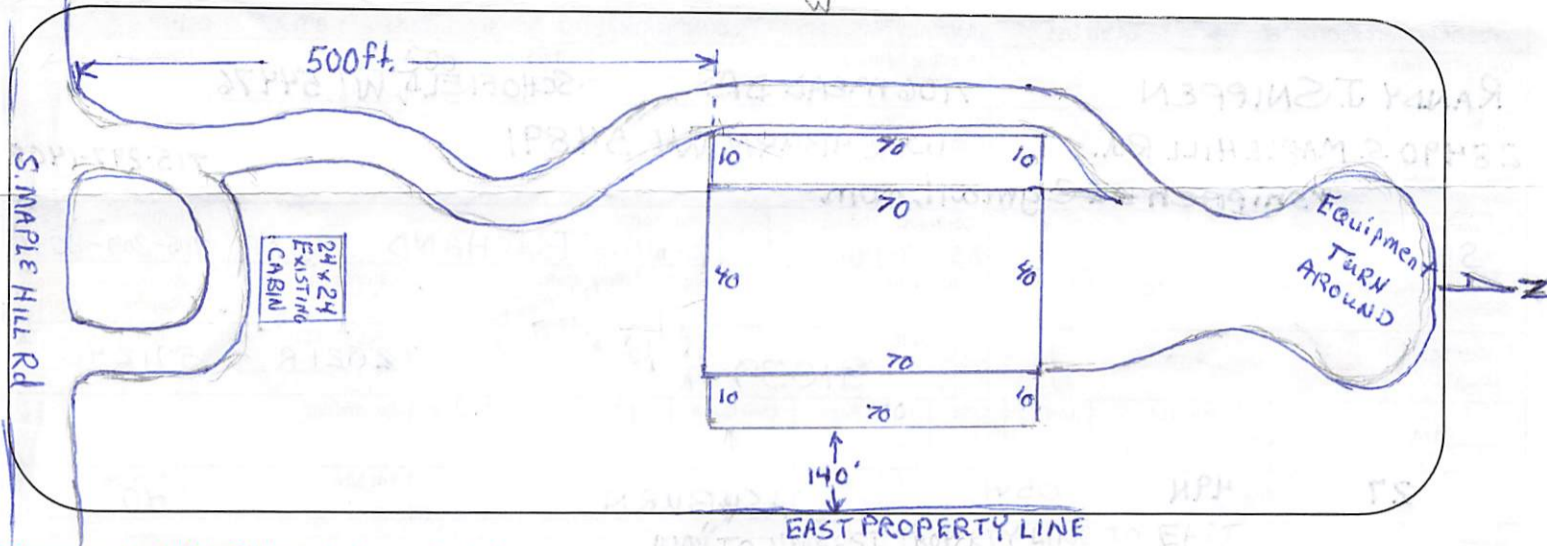
All Existing Structures on your Property

(*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P)

(*) Lake; (*) River; (*) Stream/Creek; or (*) Pond

(*) Wetlands; or (*) Slopes over 20%

Fill Out in Ink – NO PENCIL



Please complete (1) – (7) above (prior to continuing)

Changes in plans must be approved by the Planning & Zoning Dept.

- (8) Setbacks: (measured to the closest point)

Description	Setback Measurements	Description	Setback Measurements
Setback from the Centerline of Platted Road	530 Feet	Setback from the Lake (ordinary high-water mark)	N/A Feet
Setback from the Established Right-of-Way	500 Feet	Setback from the River, Stream, Creek	N/A Feet
		Setback from the Bank or Bluff	N/A Feet
Setback from the North Lot Line	1060 Feet	Setback from Wetland	N/A Feet
Setback from the South Lot Line	500 Feet	20% Slope Area on the property	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Setback from the West Lot Line	1120 Feet	Elevation of Floodplain	N/A Feet
Setback from the East Lot Line	140 Feet	Setback to Well	N/A Feet
Setback to Septic Tank or Holding Tank	N/A Feet		
Setback to Drain Field	N/A Feet		
Setback to Privy (Portable, Composting)	Feet		

Prior to the placement or construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

- (9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE(s):

All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.
For the Construction of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code.
The local Town, Village, City, State or Federal agencies may also require permits.

If subject property is part of a Condominium Plat, applicant hereby certifies and represents that applicant has all necessary approvals and recorded documents required to complete the project for which this permit is sought including requirements set forth in Wisconsin statutes pertaining to condominium associations, the Declaration of the Condominium Association in which the property is located, and all other rules, regulations and requirements pertaining to that Condominium Association.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

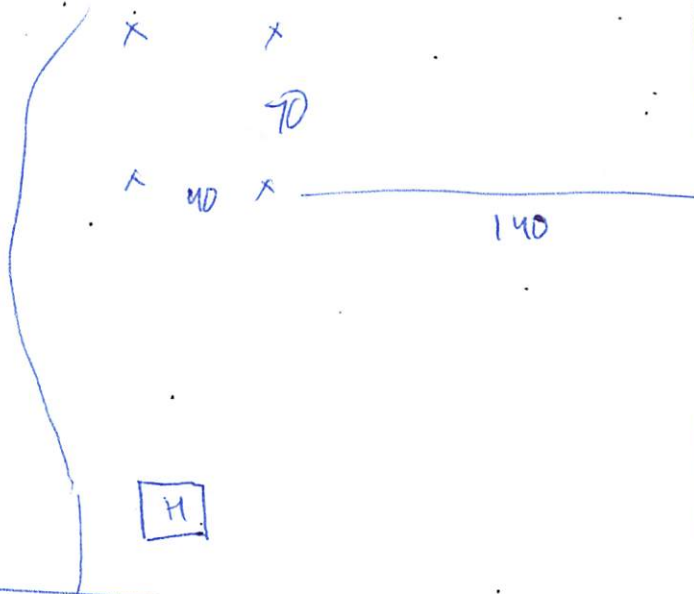
Issuance Information (County Use Only)		Sanitary Number: 22-1559	# of bedrooms: 2	Sanitary Date: 10-20-2022
Permit Denied (Date):		Reason for Denial:		
Permit #: 22-0307		Permit Date: 11-4-2022		
Is Parcel a Sub-Standard Lot	<input type="checkbox"/> Yes (Deed of Record) <input checked="" type="checkbox"/> No	Mitigation Required	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Affidavit Required
Is Parcel in Common Ownership	<input type="checkbox"/> Yes (Fused/Contiguous Lot(s)) <input checked="" type="checkbox"/> No	Mitigation Attached	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Affidavit Attached
Is Structure Non-Conforming	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Granted by Variance (B.O.A.)		Previously Granted by Variance (B.O.A.)		
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Case #:		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Case #:		
Was Parcel Legally Created		Were Property Lines Represented by Owner		
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Was Proposed Building Site Delineated		Was Property Surveyed		
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Inspection Record:		Zoning District (F-1)		
site staked out		Lakes Classification ()		
Date of Inspection: 10-31-2022		Date of Re-Inspection:		
Inspected by: gpm				
Condition(s): Town, Committee or Board Conditions Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No – (If No they need to be attached.)				
To meet all setbacks, including eaves and overhangs. For personal storage only. No bedrooms permitted. Town/State/P/R permits may be required				
Signature of Inspector: Erica Mulman				Date of Approval: 11-1-22
Hold For Sanitary: <input type="checkbox"/>	Hold For TBA: <input type="checkbox"/>	Hold For Affidavit: <input type="checkbox"/>	Hold For Fees: <input type="checkbox"/>	<input type="checkbox"/>

Field Investigation

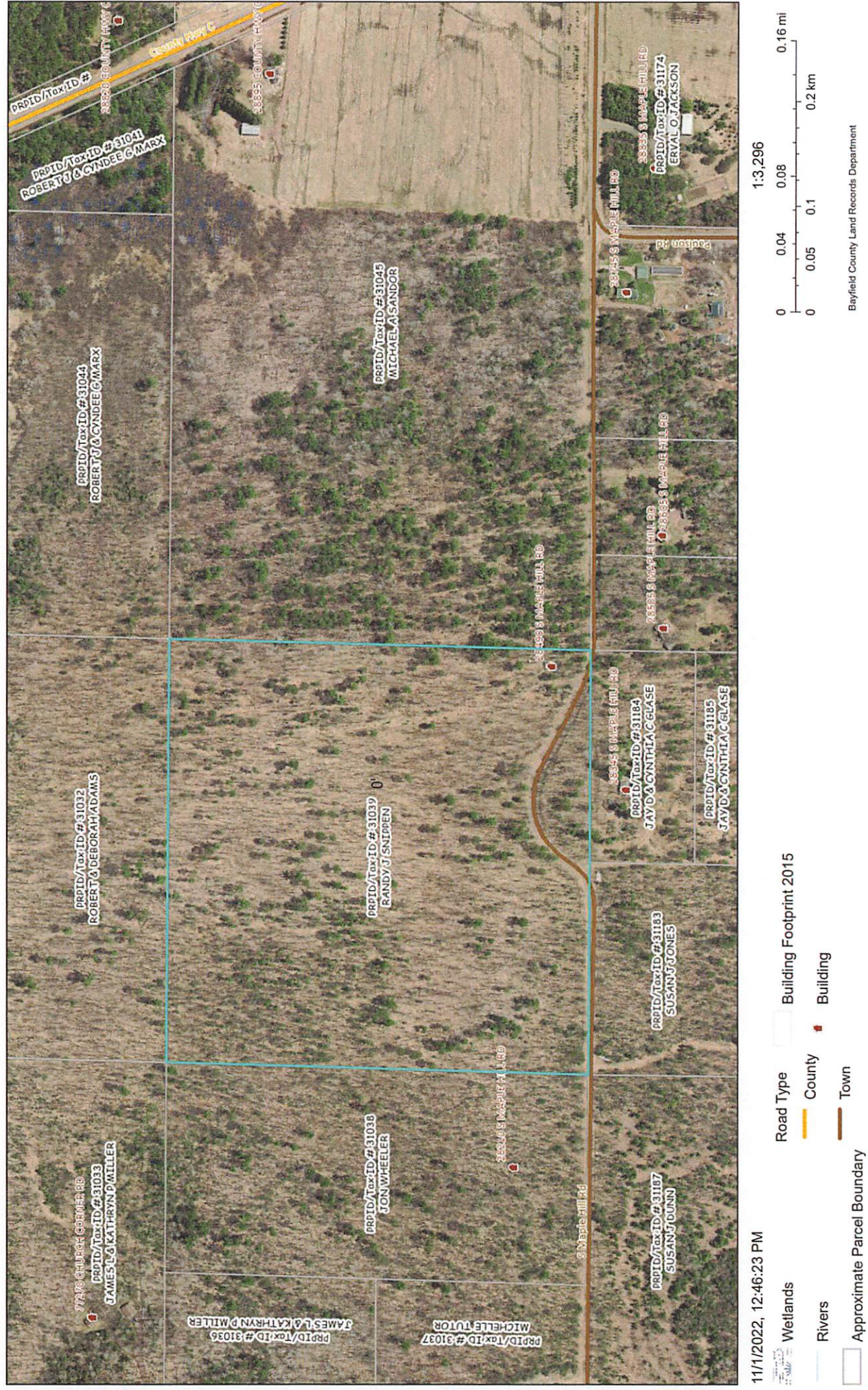
Date: 10-31-22	Arrive: 10:50	Depart: 11:15
Landowner: Snippen, Randy	Photos taken: Yes	No
Project Location: 28440 S. Maple Hill Rd	Persons Present: 2M, 1S, 1H, 1P, 1B	
Waterway: Washburn	Purpose of visit:	
PIN# _____ *Attach Real Estate Inquiry*	<input type="checkbox"/> ZP Onsite <input type="checkbox"/> Sanitary <input type="checkbox"/> Floodplain <input type="checkbox"/> Boathouse <input type="checkbox"/> Averaging <input type="checkbox"/> Other:	<input type="checkbox"/> SAP <input type="checkbox"/> Wetland Delineation <input type="checkbox"/> OHWM <input type="checkbox"/> Complaint <input type="checkbox"/> Walkout
Paid \$ _____	Receipt # _____	

garage 3
40 acres
F-1

[Signature]



Bayfield County, WI



QUIT CLAIM DEED

Document No.

Mark E. Ruff, Grantor, quit claims to Randy Snippen, Grantee, the following described real estate (the Property) in Bayfield County, State of Wisconsin:

The Southeast Quarter of the Southwest Quarter (SE $\frac{1}{4}$ -SW $\frac{1}{4}$), Section Twenty-seven (27), Township Forty-nine (49) North, Range Five (5) West.

Together with all appurtenant rights, title and interest.

This is **not** homestead property.

COPY
Not Recording Stamp

Return to:

Gregory P. Dowling
P.O. Box 65
Bloomer, WI 54724

TAX PARCEL NUMBER:

04-050-2-49-05-27-3 04-000-10000

Dated this 20TH day of SEPTEMBER, 2021.

Mark E. Ruff (SEAL)
Mark E. Ruff

ACKNOWLEDGEMENT

STATE OF WISCONSIN }
CHIPPEWA COUNTY } ss.

Personally came before me this 20TH day of SEPTEMBER, 2021, the above named Mark E. Ruff, to me known to be the person who executed the foregoing instrument and acknowledged the same.

Kelsey Zweifelhfer

*
Notary Public, Chippewa County, Wisconsin
My commission is permanent. (If not, state
expiration date: 3-28-2025)

Drafted by:
Gregory P. Dowling, Attorney
Bloomer, WI 54724



TOWN OF WASHBURN TREASURER

LYNN ADAMS

PO BOX 216

WASHBURN WI 54891

Phone: (715) 209-6784

E-Mail: treasurer@townofwashburn.com

**STATE OF WISCONSIN - BAYFIELD COUNTY
REAL ESTATE PROPERTY TAX BILL FOR 2021**RANDY J SNIPPEN
TOWN OF WASHBURN**PAYMENTS** should reference: **Tax ID: 31039****DOCUMENT RECORDING**, or anything else should reference:**PIN:** 04-050-2-49-05-27-3 04-000-10000**Alternate/Legacy ID:**

050-1046-06 000

Ownership: RANDY J SNIPPEN

Important: Be sure this description covers your property. Note that this description is for tax bills only and may not be a full legal description. See reverse side for important information.

Property Description / Location of Property**Site Address:** 28490 S MAPLE HILL RD**Description:** Sec 27 Tn 49 Rg 05 SE SW IN DOC 2021R-591246 436**RANDY J SNIPPEN**

7106 MEAD DR

SCHOFIELD WI 54724

Please include self-addressed, stamped envelope for return receipt.

Please inform your treasurer of any billing address changes.

Acreage: 40.000**Document:** 2021R-591246

Assessed Value			Average Assessment Ratio	Net Assessed Value Rate (Does NOT reflect lottery or first dollar credit) 0.013008344	Real Estate Tax: 969.12 First Dollar Credit: -54.49 Lottery Credit: -0.00 Net Real Estate Tax: 914.63 Total Due: 914.63
<u>Land</u>	<u>Improved</u>	<u>Total</u>			
\$60,400	\$14,100	\$74,500	0.84658		
Estimated Fair Market Value			An "X" means unpaid prior year taxes. <input type="checkbox"/>	School taxes reduced by school levy tax credit. \$131.79	For full payment pay to TOWN OF WASHBURN treasurer by January 31, 2022
<u>Land</u>	<u>Improved</u>	<u>Total</u>			
\$71,300	\$16,700	\$88,000			
Estimated State Aids Allocated Tax District			Net Tax		% Tax Change
			2020	2021	
Taxing Jurisdiction	2020	2021	2020	2021	
COUNTY	21,156	22,936	352.90	355.86	0.8
TOWN OF WASHBURN	358,843	364,905	77.83	77.50	-0.4
SCHL-WASHBURN	644,882	683,862	517.72	507.52	-2.0
TECHNICAL COLLEGE	43,946	47,041	31.01	28.24	-8.9
Totals	1,068,827	1,118,744	979.46	969.12	-1.1
First Dollar Credit			56.89	54.49	-4.2
Lottery & Gaming Credit			0.00	0.00	0.0
Net Property Tax			922.57	914.63	-0.9

Warning If not paid by due dates,
installment option is lost and total tax is
delinquent and subject to interest and if
applicable, penalty. (See reverse)

Real Estate Bayfield County Property Listing

Today's Date: 11/1/2022

Property Status: **Current**

Created On: 3/15/2006 1:16:06 PM









 **Description** Updated: 10/14/2021

Tax ID: 31039
PIN: 04-050-2-49-05-27-3 04-000-10000
 Legacy PIN: 050104606000
 Map ID:
 Municipality: (050) TOWN OF WASHBURN
 STR: S27 T49N R05W
 Description: SE SW IN DOC 2021R-591246 436
 Recorded Acres: 40.000
 Calculated Acres: 40.189
 Lottery Claims: 0
 First Dollar: Yes
 Zoning: (F-1) Forestry-1
 ESN: 130

 **Tax Districts** Updated: 3/15/2006

1 STATE
 04 COUNTY
 050 TOWN OF WASHBURN
 046027 SCHL-WASHBURN
 001700 TECHNICAL COLLEGE

 **Recorded Documents** Updated: 2/23/2009

 **QUIT CLAIM DEED**
 Date Recorded: 10/1/2021 2021R-591246
 **TERMINATION OF DECEDENT'S INTEREST**
 Date Recorded: 8/3/2021 2021R-590100
 **QUIT CLAIM DEED**
 Date Recorded: 11/8/2013 2013R-552233 1117-742
 **QUIT CLAIM DEED**
 Date Recorded: 11/8/2013 2013R-552232 1117-741
 **QUIT CLAIM DEED**
 Date Recorded: 10/8/2008 2008R-523232 1004-141
 **STMT OF TERMINATION & CONFIR OF INT IN PROP**
 Date Recorded: 7/3/2008 2008R-521696 998-916
 **CONVERSION**
 Date Recorded: 3/15/2006 631-329
 **WARRANTY DEED**
 Date Recorded: 1/6/1995 417116 631-329

 **Ownership** Updated: 10/14/2021**RANDY J SNIPPEN** SCHOFIELD WI**Billing Address:**

RANDY J SNIPPEN
 7106 MEAD DR
 SCHOFIELD WI 54724

Mailing Address:

RANDY J SNIPPEN
 7106 MEAD DR
 SCHOFIELD WI 54724

 **Site Address** * indicates Private Road

28490 S MAPLE HILL RD WASHBURN 54891

 **Property Assessment** Updated: 3/30/2017**2022 Assessment Detail**

Code	Acres	Land	Imp.
G1-RESIDENTIAL	5.000	17,500	14,100
G6-PRODUCTIVE FOREST	35.000	42,900	0

2-Year Comparison

	2021	2022	Change
Land:	60,400	60,400	0.0%
Improved:	14,100	14,100	0.0%
Total:	74,500	74,500	0.0%

 **Property History**

N/A

Town, City, Village, State or Federal
Permits May Also Be Required

LAND USE – **X**
SANITARY – **22-155S**
SIGN –
SPECIAL –
CONDITIONAL –
BOA –

BAYFIELD COUNTY

PERMIT

WEATHERIZE AND POST THIS PERMIT
ON THE PREMISES DURING CONSTRUCTION

No. **22-0307** Tax ID: **31039** Issued To: **Randy Snippen**

Location: **SE** $\frac{1}{4}$ of **SW** $\frac{1}{4}$ Section **27** Township **49** N. Range **5** W. Town of **Washburn**

Gov't Lot Lot Block Subdivision CSM#

Residential Structure in F-1 zoning district

For: **Accessory: [1- Story]; Garage/Storage on a Slab (70' x 40') = 2,800 sq. ft.]**

Possible Lean-to on West Side and East Side of Structure (70' x 10') each. Height of 26'

(Disclaimer): Any future expansions or development would require additional permitting.

**Condition(s): Must meet and maintain setbacks including eaves and overhangs. For Personal Storage Only.
Not for Human Habitation or Sleeping Purposes. Town/State/DNR permits may be required.**

NOTE: This permit expires one year from date of issuance if the authorized construction work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.

This permit may be void or revoked if any performance conditions are not completed or if any prohibitory conditions are violated.

Erica Meulemans, AZA

Authorized Issuing Official

November 4, 2022

Date